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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Jeff S. Eder) Examiner:
Serial No. 10/821,504) Art Unit:
Filed: April 9, 2004)
For: A BUSINESS ACTIVITY MANAGEMENT)
SYSTEM)

PRELIMINARY AMENDMENT

Commissioner for Patents
Mail Stop Non Fee Amendment
P.O. Box 1450
Alexandria, VA 22313-1450

Sir or Madam:

Prior to examination of the above-referenced application, the Applicant respectfully requests the Examiner to enter the following amendments.



PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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(to be used for all correspondence after initial filing)

Application Number	10/821,504
Filing Date	04/09/2004
First Named Inventor	Jeff Eder
Group Art Unit	
Examiner Name	
Attorney Docket Number	VM-65

Total Number of Pages in This Submission **3****ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return receipt postcard Preliminary amendment
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jeff Eder
Signature	
Date	06/23/2004

CERTIFICATE OF MAILING

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Typed or printed name	Jeff Eder		
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